identified in each area where epidemics are most likely to occur. Encouragement should be given to such regional organizations to refine remove sensing techniques to assist in planning of control measures in epidemics. Closer collaboration is needed between WHO and other international organizations, especially FAO, UNICEF, UNFP, etc. to assist standardization of supplies and spare parts, where applicable, through the Inter Agency Procurement Services Unit (IAPSU). In general equipment should be supplied with sufficient spare parts to operate equipment effectively for at least one year.

9. The appropriateness of aerial spraying as opposed to alternative methods of control, especially its effect on the environment, should be carefully considered. Recognizing the importance of large scale treatments in vector control programmes such as the tsetse and onchcerciasis programmes continued research is needed to unprove atomisation for adulticiding and larviciding from aircraft, and develop accurate track guidance systems for small aircraft.

10. Training should be promoted at regional and national levels and the production of improved instructions manuals and other visual aids, such as slides and videods hould be encouraged to assist in training programmes that can be easily adapted to different language and socio-economic needs.

11. Continued emphasis is needed on training manegers at community level vector control programmes and in maintenance of equipment, with a system developed for supervising application of pesticides. the Committee recomended that the formal training and certification in the safe handling and management of pesticides and related pesticide application equipment should be made mandatory for all operators in the vector control programmes of Member Countries. Continuation of Inter-countries and regional training seminars for managers and other personnel in vector control should be encouraged.

मैसर्स अग्रवाल कोल्ड ड्रिन्क्स, ब्रह्मपुरी, दिल्ली द्वारा मृदु पेयों की सप्लाई

2505. **श्री सुनील कुमार पट्टनायक :** क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या यह सच है कि गत कई वर्षों से दिल्ली में मैसर्स अग्रवाल कोल्ड ड्रिन्क्स चौहान बाजार, मेन रोड, ब्रह्मपुरी साधारण दुकानदारों तथा आस-पास के निवासियों को जाली ट्रेड मार्क के मृदु पेयों की सप्लाई करने के अवध व्यापार में लगा हुआ है और इसके कारण कई बीमारियों के साथ-साथ वहां पर हैजे के फैलने का खतरा उत्पन्न हो रहा है;

(ख) यदि हां, तो क्या सरकार इसकी रोकथाम करने का विचार रखती है, और यदि नहीं तो क्या इसकी केन्द्रीय जांच ब्यूरो से जांच कराए जाने का कोई प्रस्ताव है ; और

(ग) यदि हां, तो कब तक और यदि नहीं तो इसके क्या कारण हैं ?

स्वास्थ्य और परिवार कल्याण मंत्रालय के राज्य मंत्री (श्री रफीक आलम) : (क) से (ग) खाद्य अपमिश्रण निवारण विभाग, दिल्ली प्रशासन द्वारा उपलब्ध की गई सूचना के अनुसार, उन्हें मैसर्स अग्रवाल एजेंसी, डी-23/5, मेन रोड ब्रह्मपुरी, शाहदरा, दिल्ली के खिलाफ बनावटी पेय पदार्थों की बिक्री के बारे में कोई शिकायत प्राप्त नहीं हुई । दिल्ली प्रशासन के खाद्य निरीक्षकों द्वारा उपर्युक्त व्यापारी से वातित जल के 2 नमूने उठाए गए और

उन्हें निर्धारित मानकों के अनुरूप पाया गया।

HIV antibiodies in blood supplied by private/Commercial Blood Banks in Delhi

2506. SHRI RAM AWADHESH SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what is the number of private/ commercial blood banks in Delhi;

(b) whether it is a fact that blood supplied by some of these banks has been reported to be positive for HIV antibodies; if so, the number of such cases reported during the last three years; and

(c) what steps have been taken or are proposed to be taken by Government to tackle the problem of spreading AIDS through donated blood, supplied by these private and commercial blood banks?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI RAFIQUE ALAM): (a) There are 23 blood banks in Delhi out of which 6 are commercial.

(b) Ever since the screening of blood samples for HTV antibodies in Delhi was started, about 36,486 blood samples from 23 blood banks have been screened upto July, 1989, and 54 have been found positive for HIV antibodies.

(c) Screening/testing of every sample of blood is being done in the cities of Bombay, Madras and Delhi. In Calcutta, testing would start shortly.

AIDS Referral and testing; centres in the country

2507. SHRI RAM AWADHESH SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have set up AIDS referral and testing centres in the country; if so, the details thereof indicating the total number, location and year of establishment;

(b) whether Government propose to expand these facilities; if so, the details thereof;

(c) what specific steps Government are taking to prevent the spread of AIDS among prostitutes who fall in the high risk group;

(d) whether Government have formulated any policy for the treatment of AIDS patients, whether in isolation or with patients afflicted with other diseases, if so, details thereof; and

(e) whether Government are undertaking any mass education and warning programmes in an effort to prevent spread of AIDS; if so, the details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI RAFIQUE ALAM): (a) There are 40 surveillance centres and 4 referral centres functioning in different parts of the country. The list of surveillance centres with location is appended.

(b) Yes, testing facility is being expanded in a phased manner.

(c) Steps are being taken to screen the prostitutes for HIV infection, provide them with counselling and health education.

(d) AIDS patents do not require any isolation, however, adequate precaution needs be undertaken to prevent accidental infection.

(e) Yes. CHEB has taken steps to produce and distribute material for health education of general public, risk groups and HIV infected persons through various media of communication.